

**UNITED STATES COURT OF APPEALS FOR THE SECOND CIRCUIT**  
**Thurgood Marshall U.S. Courthouse 40 Foley Square, New York, NY 10007 Telephone: 212-857-8500**

**MOTION INFORMATION STATEMENT**

**Docket Number(s):** 14-1089

**Caption [use short title]**

**Motion for:** Extension of Time To Respond

Hinterberger, et al. v. Catholic Health System, Inc., et al.

Set forth below precise, complete statement of relief sought:

Extension Of Time To Respond To Plaintiffs-Appellants'

Petition To Appeal Up To And Including May 21, 2014

**MOVING PARTY:** Catholic Health System, Inc., et al.

☐ Plaintiff

☒ Defendant

☐ Appellant/Petitioner

☒ Appellee/Respondent

**OPPOSING PARTY:** Gail Hinterberger, et al.

**MOVING ATTORNEY:** Todd R. Shinaman

[name of attorney, with firm, address, phone number and e-mail]

**OPPOSING ATTORNEY:** J. Nelson Thomas

Nixon Peabody LLP

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**Court-Judge/Agency appealed from:** U.S. District Court - Western District of New York, Hon. William M. Skretny

**Please check appropriate boxes:**

Has movant notified opposing counsel (required by Local Rule 27.1):

☒ Yes

☐ No

(explain): \_\_\_\_\_

Opposing counsel's position on motion:

☐ Unopposed

☒ Opposed

☐ Don't Know

Does opposing counsel intend to file a response:

☐ Yes

☒ No

☐ Don't Know

**FOR EMERGENCY MOTIONS, MOTIONS FOR STAYS AND INJUNCTIONS PENDING APPEAL:**

Has request for relief been made below?

☐ Yes

☐ No

Has this relief been previously sought in this Court?

☐ Yes

☐ No

Requested return date and explanation of emergency: \_\_\_\_\_

Is oral argument on motion requested?

☐ Yes

☒ No

(requests for oral argument will not necessarily be granted)

Has argument date of appeal been set?

☐ Yes

☒ No

If yes, enter date: \_\_\_\_\_

**Signature of Moving Attorney:**

/s/ Todd R. Shinaman

**Date:** April 15, 2014

**Service by:** ☒ CM/ECF

☐ Other

[Attach proof of service]